

**RHODE ISLAND DEPARTMENT OF HUMAN SERVICES
EARLY INTERVENTION
STATE ANNUAL PERFORMANCE REPORT**

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Submitted by

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early intervention

supporting families and child development

Part C State Annual Performance Report (APR) for FFY 2008-2009**Overview of the Annual Performance Report Development:**

In accordance with 20 U. S. C 1416(b)(1) of the Individuals with Disabilities Education Improvement Act (IDEA) amendments of 2004 and 20 U. S. C. 1442 Rhode Island Part C program developed a State Performance Plan which was approved by the US Department of Education (US DE) in 2006. In accordance with 20 U. S. C. 1416(b)(2)(C)(ii) and 1442, the RI Department of Human Services, as the lead agency for Part C of IDEA in RI, is submitting this FFY 2008-09 Annual Performance Report.

In addition to the family survey for indicator #4, there were two main sources of data used for this APR. The web based data collection system called the Rhode Island Early Intervention Care Coordination System (RIEICCS) was used to report statewide data for Indicators 2, 3, 5 & 6 as required by OSEP. The state also used focused monitoring data for indicators 1, 7, 8 and 9 from local providers' self-assessment data, which was verified by the State for reliability and accuracy. An annual self-assessment is required and assists providers in conducting internal quality reviews to ensure accuracy and reliability of their data and compliance to State and Federal requirements. By reviewing records internally, providers can analyze the root cause of any non-compliance and begin to take corrective action soon as possible. The State performed an on-site visit for any provider who fell below 95% compliance in any of the compliance indicators and/or if any data looks inconsistent from the data reported in RIEICCS. Providers above 95% either received a finding or corrected the non-compliance in their self-assessment. All providers received an on-site visit this year.

The Department of Human Services shared and reviewed all APR data at the Interagency Coordinating Council Meeting on January 21, 2010. Data reports included data for all indicators for each year of the State Performance Plan. A review of the APR requirements and a discussion of the data were facilitated. An Indicator Progress Review Chart, which provides data for each indicator by provider, as well as this annual report and an updated State Performance Plan is available on the DHS website at <http://www.dhs.ri.gov/Publications/ReportsPublications/EarlyIntervention/tabid/751/Default.aspx>

A notice to all ICC members and interested parties that these materials are available on the website is also distributed electronically. The SPP and APR will be available on the DHS website no later than February 12, 2010. Changes to the SPP can be identified by bold red print.

Please note that the original signed copy of the Annual Report Certification of the Interagency Coordination Council has been sent separately to OSEP via US Mail and has also been scanned and sent electronically with this document.

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Monitoring Priority: Early Intervention Services In Natural Environments

Indicator #1: Percent of infants and toddlers with IFSPs who receive the Early Intervention services on their IFSPs in a timely manner.

(20 USC 1416(a)(3)(A) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services, including the reasons for delays.

Data Source: Focused Monitoring Data

FFY	Measurable and Rigorous Target
08-09	100%

Actual Data for 08-09: 88.17%

Timely Services (July 1, 2008-June 30, 2009)	# of children	%
Number of child records reviewed and found compliant	140	82.84%
Number of children with untimely services due to family reason	9	5.33%
Number of child records reviewed and found non-compliant	20	11.83%
Total	169	100.00%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 08-09:

RI has made progress with this indicator. In FFY 07-08, 83.33% of records reviewed were found compliant relative to the receipt of timely services compared with 88.17% for FFY 08-09. Additional FFY 08-09 quarterly analysis found 86% of records reviewed during January-March of 2009 (N = 114) showed timely receipt of services compared to 90% (N = 55) of records reviewed during April-June of 2009.

RI defines timely services as services initiated within 30 days of the signature on the initial and subsequent IFSPs active during the review period.

An IFSP was considered in compliance if all services were delivered within 30 days or if a service was not delivered due to exceptional family circumstances that were documented in the record (e.g., child illness, family illness, hospitalization, or family unable to be contacted).

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Each provider collected data for this indicator through a self-assessment in October 2009. The State gave each provider a list of specific records to review that made up 10% of the enrollment for that provider (or 20 records, whichever number was greater). The records selected were for children who were referred and enrolled after January 1, 2009 for this report. This date was selected as it coincided with the rollout of an improvement activity of developing new paperwork and guidance. The State compared the self-assessment data with the data from RIEICCS, the State's data collection system for Early Intervention as a first step in data verification. In addition to issuing findings of noncompliance to each provider that was below 100%, the State conducted site visits for all providers whose data from the self-assessment was below 95%. The State selected 5% of the self-assessment records and conducted data verification at each program as well. More records were reviewed if a discrepancy was found with the provider's self-assessment. Providers above 95% either received a finding or corrected the non-compliance in their self-assessment.

Timely Services is reviewed by taking all new services listed on the initial and subsequent IFSPs and comparing it to the Services Rendered Forms to determine if a service was provided within 30 days of the signature on the IFSP. The Paperwork Project (Improvement Activity) has resolved the disconnect between the services indicated on the IFSP and how they were coded on the Services Rendered Forms. Services Rendered Forms are used to provide information to families, to document service delivery, and to submit claims to insurers. When there was a disconnect with appropriate coding, it appeared as though a service did not occur when it was really coded incorrectly. After conducting site visits to verify self-assessment data, the state is confident that the new paperwork did resolve the coding issues, as significant improvement was evident in comparison with the pre-improvement activity records vs post-improvement activity records.

Further analysis from the site visits and record reviews indicate that most services are delivered on time; the primary cause for non-compliance during this time period was insufficient funding to support the recruitment/retention of certain therapists (OT, PT, and Speech) as well as marketplace competition for these clinicians. These are the services that are most often delivered un-timely. In addition, RI continues to experience steady growth in referrals and enrollment. Verification of correction showed that in all cases each child did receive the services identified on their IFSP's, even though they were untimely.

A secondary cause is the difficulty that providers have in monitoring their compliance. Providers are working hard on tracking this indicator but have requested a better tool to accomplish this task. Small changes have been made to the RIEICCS but a major update still needs to be implemented. The State utilizes self-assessment data for reporting to ensure that valid and reliable data is available for this report. RIEICCS reports that 92% of services are timely. However, RIEICCS has two options for billing, so there are two different reports based on the billing option the provider is using. The current reports in RIEICCS are hard to use, prone to human error and labor intensive because they must be manually corrected for errors prior to use (one must review the IFSP and then the billing component). Not all providers are able to use this report with success to track their compliance/progress in this area.

The State reviewed RIEICCS and developed system changes that will make tracking of this indicator easier for all providers by creating improvements which are automated thereby eliminating errors caused by data entry and in use of the forms in the field. In addition, fields were added to the IFSP to record when services begin and end. Once this is completed, all providers will be able to use the same report and the indicator will be monitored more easily (through the IFSP). By June of 2010 the changes should be completed with data analysis for FFY 2012 to be system-generated. This update will also allow a better analysis to the number of days it takes for services to be delivered even when untimely. The State will then be able to report data similar to the 45-day time-line.

A third factor contributing to noncompliance is that Rhode Island has an excellent system for child find (indicators 5 & 6) and has experienced steady and continual enrollment growth. The State has certified three new programs since 1/06, in an effort to improve the timeliness and quality of services

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to all children and families. Although some progress can be attributed to this Improvement Activity, it did spread the pool of available therapists in Rhode Island even thinner.

Enrollment

2004-05: **1290** 2006-07: **1646** 2008-09: **1764**
2005-06: **1610** 2007-08: **1690**

Correction of FFY 07-08 Findings of Noncompliance (if State reported less than 100% compliance) and Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

Year Non-compliance Identified	Total Findings: Timely Services	# of Findings Corrected and Verified within 1 year	# of Findings for which Correction was subsequently corrected and verified	Total Findings Corrected	% Findings Corrected as of 2/1/10
FFY 04-05	7	0	7	7	100%
FFY 05-06	0	0	0	0	100%
FFY 06-07	6	6	0	6	100%
FFY 07-08	6	4	0	4	66.66%
FFY 08-09	3	N/A	N/A	0	0

* Findings from FFY 08-09 were made 1-6-10 and the one-year correction requirement has not yet passed.

The State has verified that each EIS program with noncompliance reported by the State under this indicator in the FFY 2007 APR: (1) is correctly implementing the specific regulatory requirements; and (2) has initiated services for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Actions Taken if Noncompliance Not Corrected

Two providers (out of six) did not demonstrate timely correction of non-compliance within the year of the FFY-07-08. Despite steps taken to correct this issue, significant improvement was not made. A more stringent state review will occur monthly as it has proven to be effective with other providers. A letter of non-correction of non-compliance was sent in January 2010 (one year from the initial finding) requiring the providers to obtain mandated TA for CAP development, including specific progress reporting requirements to state staff and monthly monitoring meetings until correction is verified.

Verification of Correction (either timely or subsequent):

For FFY 07-08, four providers (out of six) demonstrated correction of non-compliance. Two providers have not corrected. All providers with findings are required to submit corrective action plans on a State mandated reporting template that includes: analysis of the root cause(s) of the non-compliance, steps to be taken to reach compliance, persons responsible, and timelines. These corrective action plans must be approved by the State. Technical assistance was available for the development of effective plans. Providers were required to submit evidence of correction within one year that includes evidence of completion of the steps identified and the successful impact of those steps via a data report from RIECCS or a self-assessment.

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All findings for FFY-04-05, 05-06, and 06-07 have all been corrected and closed.

Correction of Non-Compliance	Description
1. Describe the analysis that the state did to determine <i>where</i> the noncompliance occurred (in which EI programs);	<ul style="list-style-type: none"> • desk audit of all programs (utilizing state-wide EI data system) • program self-assessment of all IDEA requirements, with state defined set of children/records • site-based focused monitoring with data verification (record review) • formalization of Data Review Committee that convenes monthly meetings for review/analysis/technical assistance planning
2. Describe the state's process for determining <i>why</i> that noncompliance occurred, both at state level and local level;	<ul style="list-style-type: none"> • program self-assessment including explanation of cause for non-compliance • site-based discussion of root causes with management staff • comparison of data across programs/over time • disaggregation of data by service/time period/provider • program survey re: recruitment/retention patterns
3. Describe <i>what the state did</i> to require EI programs to revise policies, procedures or practices (if needed);	<ul style="list-style-type: none"> • developed and implemented required new paperwork • provided state-wide, site-based training/technical assistance accompanied new EI paperwork • completion /dissemination of new IFSP Guidance Document • regular data requests to all programs re: missing data corrective action plans required of all programs with a finding of non-compliance in this area
4. Explain how the state <i>collected data to verify</i> that the noncompliance was corrected	<ul style="list-style-type: none"> • corrective action plans required of all programs with a finding of non-compliance in this area . • corrective action plans included: steps to be taken to correct the issue of non-compliance, by whom, and by when- State followed up by requiring evidence that the steps were taken and that the issue that caused the non-compliance was corrected. • Progress data is submitted monthly or bi-monthly by providers with findings and is verified by the state
5. Describe any <i>enforcement actions</i> that the state took for any EI programs that did not correct noncompliance in a timely manner (within one year).	<ul style="list-style-type: none"> • 2 Programs have not corrected non-compliance within one year and are required to obtain mandated TA for new CAP development, including specific progress reporting requirements to state staff and monthly monitoring meetings until correction is verified

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Improvement Activities	Timelines	Resources	Status
Training and technical assistance	Ongoing	Sherlock Center on Disabilities	Ongoing
New data system	8/06 Implementation and Ongoing	Data manager and Welligent	Ongoing
Analysis of data reports	Monthly and Ongoing	Data Review Team: Data manager, Part C Coordinator, Sherlock Center on Disabilities	Ongoing
Develop a reimbursement manual	June 08	Lead agency staff, providers, Sherlock Center on Disabilities	Completed and disseminated August 2008.
Revise EI paperwork in order to ensure accurate match between IFSP service and service coded on services rendered forms. Reimbursement Guide will be completed, but is no longer the mechanism for improved compliance in this area; instead, this was done through the paperwork revisions.	Pilot by 12/07 Implement by 3/08	Paperwork Project Committee (Lead agency staff, Sherlock Center on Disabilities, providers)	Completed
Monitor reliability and accuracy of timely services data report.	6/08 and Ongoing	Data manager, providers	Completed 6/08 and ongoing
Analyze and decide whether or not to change timely service definition to date of initiation as agreed to by the parent signature on the IFSP in order to simplify and improve reliability of monitoring reports.	Make final decision by 3/31/09 and implement by 5/1/09	Data manager, providers, ICC, lead agency staff, Sherlock Center on Disabilities	Completed -Final decision made to not change definition.

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Improvement Activities	Timelines	Resources	Status
In order to address the difficulties that providers face in recruitment and retention of therapists, the State will begin collaboration with higher education personnel to (1) develop consistent procedures for student placements/internships in EI (2) convene a high interest training annually for EI and other early childhood staff (3) develop and present on career choices in EI to a variety of college and community venues	By 12/08 and Ongoing	Sherlock Center on Disabilities and the University of RI.	Ongoing

Revisions, <u>with Justification</u> , to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 08-09 Improvement Activities	Timelines	Resources
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Monitoring Priority: Early Intervention Services In Natural Environments

Indicator #2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings.

(20 USC 1416(a)(3)(A) and 1442)

Measurement: Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Data Source: Data collected for reporting under section 618 (Annual Report of Children Served).
Table 2

FFY	Measurable and Rigorous Target
08-09	95%

Actual for 08-09: 90.99%

Natural Environments for FFY 08-09	
	# of children
Children served in: HOME	1488
Children served in: COMMUNITY-BASED SETTING	117
Children served in: OTHER SETTING (services provided in a setting that is not home or community based. These settings include, but are not limited to, services provided in a hospital, residential facility, clinic, and EI center/setting for children with disabilities)	159
TOTAL # of children with IFSP's	1764
% of children in Natural Environment (Home + Community Based Setting)	90.99%
% of children in Natural Environment (Home + Community Based Setting) AND those served in OTHER SETTINGS with justification	100%

Part C State Annual Performance Report (APR) for FFY 2008-2009**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 08-09:**

There has been progress in this indicator over the past year: from 85.86% in FFY 07-08 to 90.99% in FFY 08-09. Although the percentage has increased, we have not hit our target. We credit the increase to multiple incidences of technical assistance and clarification to all programs. A service delivery model based on family-owned, functional, and measurable outcomes and that is focused on the adult caregivers as the primary agents of change is the heart of our 'Introduction to Early Intervention' training that is mandatory for all new providers.

Our site-based focused monitoring has developed more stringent standards for reviewing the Justification Page for children receiving services in a non-natural environment. Our training and technical assistance has focused on the critical team decision-making process. Evidence of a child-specific justification and "Plan for delivering services in a natural environment" is required and we give immediate feedback to program managers when the Justification page 'fails' this test.

The main reason seen for children receiving services in a non-natural environment is because of an increase in the number of children in our Part C system that have received or will be receiving a diagnosis of Autism Spectrum Disorder. IFSP teams are sometimes recommending some more intensive group-based services as part of a service package. Our review focuses on whether these decisions follow the mandated individualized decision-making process. If this continues to be a valid IFSP team recommendation in an increasing number of situations, then state staff is considering changing our target (95%) in the next SPP to better match high quality, individualized service provision.

NATURAL ENVIRONMENTS	FY 04-05	FY 05-06	FY 06-07	FY 07-08	FY 08-09
Services provided in natural environments	94.81	91.41	88.94	85.86	90.99
Documented justified reason for non-natural environment	.60	4.03	7.05	14.14	9.11
Services provided in a natural environment or appropriate justification for services provided in a non-natural environment	95.41	95.44	95.99	100%	100%

Improvement Activities	Timelines	Resources	Status
Introduction to EI-training for all new staff	Twice annually	Sherlock Center on Disabilities, Rhode	Ongoing

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Improvement Activities	Timelines	Resources	Status
		Island Parent Information Network, Lead agency staff	
Review and analysis of statewide and program data	Monthly	Data manager, providers	Ongoing
Justification for services provided in the non-natural environment-added to system	8/06	Data manager, Welligent	Completed
Public awareness activities to increase the understanding of EI services and delivery model.	Each provider must complete 3 activities annually	Providers	Ongoing
Paperwork revision project	Pilot by 12/07 Implement by 3/08	Paperwork Project committee (Lead agency staff, Sherlock Center on Disabilities, providers)	Completed and implemented 1/08 Training and TA-ongoing
Paperwork revision project to match federal location settings-clarification to be sent to all providers	By 3/08	Data manager, providers	Completed 1/08

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 08-09

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Monitoring Priority: Early Intervention Services In Natural Environments

Indicator #3: Percent of infants and toddlers with IFSPs who demonstrate improved:

1. Positive social-emotional skills (including social relationships);
2. Acquisition and use of knowledge and skills (including early language/communication); and
3. Use of appropriate behaviors to meet their needs.
(20 USC 1416(a)(3)(A) and 1442)

Measurement:

Outcomes:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication); and
- C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

- a. Percent of infants and toddlers who did not improve functioning = $\left[\frac{\text{\# of infants and toddlers who did not improve functioning}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = $\left[\frac{\text{\# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = $\left[\frac{\text{\# of infants and toddlers who maintained functioning at a level comparable to same-aged peers}}{\text{\# of infants and toddlers with IFSPs assessed}} \right]$ times 100.

Summary Statements for Each of the Three Outcomes (use for FFY 2008-2009 reporting):

Summary Statement 1: Of those infants and toddlers who entered or exited early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

Measurement for Summary Statement 1:

Percent = $\frac{\text{\# of infants and toddlers reported in progress category (c) plus \# of infants and toddlers reported in category (d)}}{\text{\# of infants and toddlers reported in progress category (a) plus \# of infants and toddlers reported in progress category (b) plus \# of infants and toddlers reported in}}$

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progress category (c) plus # of infants and toddlers reported in progress category (d)] times 100.

Summary Statement 2: The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned 3 years of age or exited the program.

Measurement for Summary Statement 2:

Percent = # of infants and toddlers reported in progress category (d) plus [# of infants and toddlers reported in progress category (e) divided by the total # of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e)] times 100.

Data Source: Data collected through the Rhode Island Early Intervention Care Coordination System (RIECCS)

Actual Target Data for 08-09:

See State Performance Plan for 2010 and 2011 Targets.

Actual Data for 08-09:

See State Performance Plan for baseline data and improvement activities and analysis.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 08-09:

N/A

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 08-09.

N/A

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Monitoring Priority: Early Intervention Services In Natural Environments

Indicator #4: Percent of families participating in Part C who report that Early Intervention services have helped the family:

- A. Know their rights;
 - B. Effectively communicate their children's needs; and
 - C. Help their children develop and learn.
- (20 USC 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.
- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.
- C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

Data Source: Family Survey 2006-2007

FFY	Measurable and Rigorous Target
08-09	A. 86% B. 92% C. 93%

Actual Target Data for FFY 08-09 A) 91.33% B) 93.45% C) 95.77%

A) Q#16 - To what extent has early intervention helped your family know and understand your rights?

Agency	# SCORED 5 OR ABOVE	Total	%
Children's Friend and Service	16	17	94.12%
Easter Seals	33	39	84.62%
Family Resources	58	62	93.55%
Family Service	44	47	93.62%
Hasbro	53	55	96.36%
Homestead	37	39	94.87%
Looking Upwards	18	21	85.71%
Maher Center	19	23	82.61%
Meeting Street Center	64	67	95.52%
Trudeau Memorial	90	103	87.38%
State Total	432	473	91.33%

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B) Q#17 - To what extent has early intervention helped your family effectively communicate your child's needs?

Agency	# SCORED 5 OR ABOVE	Total	%
Children's Friend and Service	16	17	94.12%
Easter Seals	37	39	94.87%
Family Resources	60	62	96.77%
Family Service	46	47	97.87%
Hasbro	51	55	92.73%
Homestead	36	39	92.31%
Looking Upwards	20	21	95.24%
Maher Center	19	23	82.61%
Meeting Street Center	62	67	92.54%
Trudeau Memorial	95	103	92.23%
State Total	442	473	93.45%

C) To what extent has early intervention helped your family be able to help your child develop and learn?

Agency	# SCORED 5 OR ABOVE	Total	%
Children's Friend and Service	16	17	94.12%
Easter Seals	38	39	97.44%
Family Resources	60	62	96.77%
Family Service	45	47	95.74%
Hasbro	53	55	96.36%
Homestead	37	39	94.87%
Looking Upwards	20	21	95.24%
Maher Center	21	23	91.30%
Meeting Street Center	62	67	92.54%
Trudeau Memorial	101	103	98.06%
State Total	453	473	95.77%

NOTES:

**Please see Attachment A for the family survey.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 08-09:

RI has continued to make progress in each of the family outcomes. Under a contract with the Rhode Island Department Human Services (DHS), the Rhode Island Parent Information Network (RIPIN) provides parent consultant services to all certified Early Intervention programs in RI. Within this contract, RIPIN administers the annual Family Survey, and has done so under a previous contract with the RI Department of Health, since 2000.

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The Early Childhood Outcomes Center (ECO Center) Family Outcomes Survey was utilized beginning with the 2006 Family Survey. With permission from the ECO Center, changes were made to the format, as well as minor changes to some questions to reflect current practice and language in RI. For the 2008 Family Outcomes Survey, the same cover letter and survey from 2007 were utilized.

The Family Survey is color-coded to identify the EI Provider and is mailed in envelopes that have a return address of RIPIN and utilizes both the EI and RIPIN logo. Also included is a cover letter explaining the survey; the optional demographics page, and a self-addressed stamped envelope to be returned to the Parent Consultant Program at RIPIN.

Aggregated information from the return surveys includes: number of returns, number of undeliverable addresses, DCYF involvement, EI Provider, Language (English or Spanish), and profiles and scoring of the individual questions. Demographic information collected includes: who is completing the survey, child's age when referred, child's age now, length of time in EI, 1st- 2nd- 3rd child in EI and # of children in EI currently, race/ethnicity, primary diagnosis, parental education and household income.

Families are asked if they would like to share their survey with their Service Coordinator and/or have a Parent Consultant/RIPIN staff person contact them. If a family answers yes to sharing, a complete copy of the survey is given to the Service Coordinator for the family file; which helps the SC to assist the family in reaching goals related to RI's EI Family Outcomes. If a family chooses not to share or be contacted, their information and data remains anonymous.

Finalized reports, excluding any family identifiable information, are given to the EI Providers, the ICC and to DHS. This information is also available to families and the public at their request.

RI included the 5 Family Outcomes of the ECO Center on the new IFSP itself. This reference is at a point in the IFSP prioritizing process where families are reminded of 'what we want for all families'. Via training, service coordinators are encouraged to refer families to those family outcomes as a potential trigger to identifying a need that could be developed into an IFSP outcome.

Although RI's reporting focuses on the 3 family outcomes (above), RI collects data and analyzes it for all the survey questions as a means to develop improvement activities for training, public awareness, and service delivery for families.

In addition, the family outcomes are now included on all training and public awareness materials.

Survey Response Rates	FFY 05-06	FFY 06-07	FFY 07-08	FFY 08-09
English Delivered	1423	1316	1501	1580
English Returned	411	455	500	459
English Return Rate	28.88%	34.57%	33.31%	29.05%
Spanish Delivered	130	109	114	162
Spanish Returned	16	33	26	26
Spanish Return Rate	12.31%	30.28%	22.81%	16.05%
Total Delivered	1533	1425	1615	1742
Total Returned	427	488	526	485
Total Return Rate	27.50%	34.24%	32.57%	27.84%

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Improvement Activities	Timelines	Resources	Status
Include age of child when referred to demographic question in order to improve ability to analyze data.	In 2007 family survey	RIPIN, lead agency staff, families, providers	Completed
DHS will meet with each program to review survey return rates & outcome data. DHS will open discussion regarding what went well, contributing factors to survey return rates and brainstorm ways to improve return rates.	Annually	Lead agency staff, RIPIN, providers, ICC	Ongoing
DHS will share outcome data with all certified EI programs and provide TA regarding use of data to improve outcomes, such as incorporating survey questions into regular conversations with families.	Annually	Lead agency staff, RIPIN, providers, ICC	Ongoing
DHS will revise paperwork/IFSP to incorporate family outcomes into routine conversations and interventions with family.	August 2007	Lead agency staff, RIPIN, providers, ICC	Completed

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 08-09: NA

Part C State Annual Performance Report (APR) for FFY 2008-2009

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator #5: Percent of infants and toddlers birth to 1 with IFSPs compared to national data.

(20 USC 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of infants and toddler birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to national data.

Data Source: Data collected for reporting under section 618 (Annual Report of Children Served).

<http://spp-apr-calendar.rfcnetwork.org/explorer/view/id/793>

FFY	Measurable and Rigorous Target
08-09	1.75%

Actual Data for 08-09: 2.20% (See website above for data on all States):

In 2008, Rhode Island ranks 4th (278/12,613=2.20%) out of the fifty states and District of Columbia for serving eligible infants under age 1 with disabilities.

Rhode Island also ranks 1st (278/12,613=2.20%) out of the Moderate Eligibility Criteria states for serving eligible infants with disabilities under the age of one.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 08-09:

RI has reached its target and continues to make progress in this area. RI has a very well coordinated system for identifying and referring newborns and very young children to Early Intervention across the state. All child find efforts remain in effect. They are coordinated with other child find resources in the state such as Maternal and Child Health through the Family Outreach Program, Universal Newborn Screening, and the Vulnerable Infants Program; Medicaid through RItCare and CEDARR Family Centers; the Department of Children, Youth and Families through the CAPTA initiative and Head Start/Early Head Start.

With budget constraints and resources scarce the state has agreed to help reduce travel cost and time by allowing providers to choose coverage areas based on location/travel. There are at least two providers for every city and town. All certified providers are required to conduct at least three public awareness activities per calendar year, which they report to the lead agency. These include a wide range of activities, such as outreach to potential new referral sources, meet and greet gatherings with pediatricians, EI materials to local libraries, participation in health fairs, and trainings on developmental milestones to groups such as the Narragansett Indian Tribe.

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Enrollment by City on December 1, 2009

City/Town	# of Children Under Age 1	Referred to Early Intervention		
		% of Children Under Age 1	December 1 Enrollment	% of Children per City Under Age 1
Barrington	190	2%	3	2%
Bristol	219	2%	11	5%
Burrillville	170	1%	5	3%
Central Falls	331	3%	8	2%
Charlestown	96	1%		0%
Coventry	415	3%	10	2%
Cranston	820	6%	16	2%
Cumberland	379	3%	6	2%
East Greenwich	128	1%	4	3%
East Providence	518	4%	13	3%
Exeter	62	0%	2	3%
Foster	38	0%		0%
Glocester	112	1%		0%
Hopkinton	94	1%	2	2%
Jamestown	44	0%	2	5%
Johnston	298	2%	5	2%
Lincoln	221	2%	2	1%
Little Compton	36	0%		0%
Middletown	234	2%	4	2%
Narragansett	135	1%	1	1%
New Shoreham	12	0%		0%
Newport	314	2%	7	2%
North Kingstown	345	3%	9	3%
North Providence	295	2%	7	2%
North Smithfield	113	1%	1	1%
Pawtucket	987	8%	32	3%
Portsmouth	195	2%	1	1%
Providence	2,552	20%	69	3%
Richmond	107	1%		0%
Scituate	124	1%	1	1%
Smithfield	167	1%	3	2%
South Kingstown	290	2%	5	2%
Tiverton	154	1%	1	1%
Warren	119	1%	1	1%
Warwick	906	7%	30	3%
West Greenwich	64	1%	1	2%
West Warwick	379	3%	11	3%
Westerly	276	2%	8	3%
Woonsocket	674	5%	10	1%
Unknown	NA			NA
Core Cities	5,238	42%	137	3%
Remainder of State	7,375	58%	154	2%
Rhode Island	12,613	100%	291	2%

12613

*Population based on city and town percentages from 2008 and population number based on total population from Table C-13 for Indicator 5&6.

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Improvement Activities	Timelines	Resources	Status
CAPTA referrals system development and implementation	March 06	DCYF, Lead agency staff, ICC	Completed
Require feedback loop to referral source-improve data system to monitor and provide trigger to complete within the paperwork.	August 07	Data Manager, providers	Completed
All certified providers required to complete 3 public awareness activities	Annually	Providers	Ongoing
Outreach to physician/pediatric community and develop curriculum for presentation to this target group.	December 2006: Presentation curriculum developed June 2007: Posters to pediatricians	Sherlock Center on Disabilities, Lead agency staff, ICC, RIPIN	Completed
Outreach posters for all EI providers	February 2007	Sherlock Center on Disabilities, providers, Lead agency staff	Completed
Additional newborn screenings to be put into place (12 screenings to 29 screenings)	July 2006	Dept of Health, Lead agency	Completed

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 08-09:

Part C State Annual Performance Report (APR) for FFY 2008-2009

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator #6: Percent of infants and toddlers birth to 3 with IFSPs compared to national data.

(20 USC 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of infants and toddler birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to national data.

Data Source: Data collected for reporting under section 618 (Annual Report of Children Served).<http://spp-apr-calendar.rfcnetwork.org/explorer/view/id/793>

FFY	Measurable and Rigorous Target
08-09	3.60%

Actual Target Data for 08-09 (See website above for data on all States): **4.79%**

In 2008, Rhode Island ranks 4th ($1,764/36,810=4.79\%$) out of the fifty states and District of Columbia for serving eligible infants with disabilities.

Rhode Island also ranks 1st ($1,764/36,810=4.79\%$) out of the Moderate Eligibility Criteria states for serving eligible infants with disabilities.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 08-09:

RI continues to make progress in this area. RI has a very well coordinated system for identifying and referring newborns and very young children to Early Intervention across the state. All child find efforts remain in effect. They are coordinated with other child find resources in the state such as Maternal and Child Health through the Family Outreach Program, Universal Newborn Screening, and the Vulnerable Infants Program; Medicaid through RItCare and CEDARR Family Centers; the Department of Children, Youth and Families through the CAPTA initiative and Head Start/Early Head Start.

With budget constraints and resources scared the state has agreed to help reduce travel cost and time by allowing providers to choose coverage areas based on location/travel. There are at least two providers for every city and town. All certified providers are required to conduct at least three public awareness activities per calendar year, which they report to the lead agency. These include a wide range of activities, such as outreach to potential new referral sources, meet and greet gatherings with pediatricians, EI materials to local libraries, participation in health fairs, and trainings on developmental milestones to groups such as the Narragansett Indian Tribe.

Part C State Annual Performance Report (APR) for FFY 2008-2009

Enrollment by City on December 1, 2009

Referred to Early Intervention				
City/Town	# of Children Under Age 3*	% of Children Under Age 3	December 1 Enrollment	% of Children per City Under Age 3
Barrington	555	2%	21	4%
Bristol	638	2%	45	7%
Burrillville	496	1%	19	4%
Central Falls	965	3%	57	6%
Charlestown	282	1%	12	4%
Coventry	1,211	3%	55	5%
Cranston	2,392	6%	119	5%
Cumberland	1,107	3%	45	4%
East Greenwich	374	1%	23	6%
East Providence	1,512	4%	81	5%
Exeter	182	0%	6	3%
Foster	110	0%	5	5%
Glocester	326	1%	8	2%
Hopkinton	275	1%	22	8%
Jamestown	129	0%	4	3%
Johnston	870	2%	41	5%
Lincoln	645	2%	35	5%
Little Compton	104	0%	4	4%
Middletown	682	2%	24	4%
Narragansett	393	1%	11	3%
New Shoreham	34	0%	3	9%
Newport	917	2%	47	5%
North Kingstown	1,008	3%	51	5%
North Providence	862	2%	69	8%
North Smithfield	328	1%	22	7%
Pawtucket	2,881	8%	165	6%
Portsmouth	568	2%	17	3%
Providence	7,447	20%	384	5%
Richmond	313	1%	6	2%
Scituate	362	1%	15	4%
Smithfield	486	1%	15	3%
South Kingstown	846	2%	32	4%
Tiverton	449	1%	14	3%
Warren	346	1%	14	4%
Warwick	2,645	7%	133	5%
West Greenwich	187	1%	11	6%
West Warwick	1,107	3%	77	7%
Westerly	806	2%	31	4%
Woonsocket	1,968	5%	128	7%
Unknown	NA			NA
Core Cities	15,285	42%	858	6%
Remainder of State	21,525	58%	1,013	5%
Rhode Island	36,810	100%	1,871	5%

36810

*Population based on city and town percentages from 2008 and population number based on total population from table C-13 for Indicator 5&6.

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Improvement Activities	Timelines	Resources	Status
CAPTA referrals system development and implementation	March 06	DCYF, Lead agency staff, ICC	Completed
Require feedback loop to referral source-improve data system to monitor and provide trigger to complete within the paperwork	August 07	Data Manager, providers	Completed
All certified providers required to complete 3 public awareness activities	Annually	Providers	Ongoing
Outreach to physician/pediatric community and develop curriculum for presentation to this target group.	December 2006: Presentation curriculum developed June 2007: Posters to pediatricians	Sherlock Center on Disabilities, Lead agency staff, ICC, RIPIN	Completed
Outreach posters for all EI providers	February 2007	Sherlock Center on Disabilities, providers, Lead agency staff	Completed
Additional newborn screenings to be put into place (12 screenings to 29 screenings)	July 2006	Dept of Health, Lead agency	Completed

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 08-09:

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Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator #7: Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

(20 USC 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (# of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted)] times 100.

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.

Data Source: Data to be taken from monitoring or State data system and must address timeline from point of referral to initial IFSP meeting based on actual, not an average, number of days.

FFY	Measurable and Rigorous Target
08-09	100%

Actual Data for 08-09: 91.07%

Data for this indicator includes children with a completed assessment/evaluation and initial IFSP meeting held during the time period of January 1, 2009 – June 30, 2009 from self-assessment data.

IFSPs held within 45 day time period	129
IFSPs with documented family reason for delay	24
IFSPs held beyond 45 day time period (no documented family reason)	15
TOTAL	168
% IFSPs held within 45 day time period (129 / 168)	76.78%
% IFSPs held within 45 day time period + documented family reason for delay (129+ 24 / 168)	91.07%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 08-09:

RI made progress in this area. In FFY 07-08, 83.30% of records reviewed were found compliant relative to timely evaluation and IFSP meetings compared with 91.07% for FFY 08-09. Additional FFY 08-09 quarterly analysis found 90.4% of records reviewed during January-March of 2009 (N = 114)

Part C State Annual Performance Report (APR) for FFY 2008-2009

showed compliance to timelines compared to 93.6% (N = 54) of records reviewed during April-June of 2009. Excluding the lowest performing provider would have resulted in 96.15%.

<u>Reason</u>	<u>45 days</u>	<u>50 days</u>	<u>60 days</u>	<u>70 days</u>	<u>80 days</u>	<u>Over 80 (81)days</u>
Compliance	129					
1) Child illness/hospitalization	0					
2) Family requested delay	10					
3) Unable to contact/family cancellation	14					
4) Provider Issue	0	4	4	5	2	0
Blank-no reason noted	0	0	0	0	0	0
Total	153	4	4	5	2	0
Total within time frame	153	157	161	166	168	168
Percentage within time frame	91.07%	93.35%	95.83%	98.81%	100%	100%

The State has made improvement in this indicator and in all cases children received an evaluation/assessment and initial IFSP meeting within 80 days. The State has also demonstrated improvement as evidenced by a decrease in the number of days to compliance. 8 children had their initial IFSP's between 45-60 days after referral, while 7 children had their initial IFSP's between 70-80 days after referral.

Data for this indicator was collected through a self-assessment completed in October 2009 by each provider. The State gave each provider a list of specific records to review that made up 10% of the enrollment for that provider (or 20 records, whichever number was greater). The records selected were for children who were referred and enrolled after January 1, 2009. This date was selected as it coincided with the rollout of improvement activities from the last APR. The state compared the self-assessment data with the data from RIECCS, the State's data collection system for Early Intervention. In addition to issuing findings of noncompliance to each provider that was below 100%, the State conducted site visits for all providers whose data from the self-assessment was below 95%. The State then selected 5% of those records and conducted data verification at each program as well.

Analysis of the site visits and record reviews indicate that the primary cause for non-compliance in this area was insufficient funding to support the ability of providers to address fluctuating increases in caseloads and staffing. Also, a high volume of medical and maternity leaves caused temporary reductions in staffing along with difficulties with recruitment and retention of qualified staff to conduct the evaluations given fluctuating caseload sizes and referrals. The State has provided training/technical assistance focused on this indicator. The State will work to assist programs in identifying non-compliance more proactively in order to develop immediate resolutions.

Rhode Island is in compliance with 45-day time-line provision requirement in 34 CFR 303.321(e)(2), 303.322(e)(1) and 303.342(a) including correction of noncompliance the state reported under this indicator in FFY 2007. The State assures that all children received an evaluation and initial IFSP meeting even when providers did not meet the 45-day time-line as the table above indicated.

Part C State Annual Performance Report (APR) for FFY 2008-2009**Enrollment**

2004-05: 1290

2005-06: 1610

2006-07: 1646

2007-08: 1690

2008-09: 1764

Correction of FFY 2007 Findings of Noncompliance (if State reported less than 100% compliance) and Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

Year Non-compliance Identified	Total Findings: 45 Day Timeline	# of Findings Corrected and Verified within 1 year	# of Findings for which Correction was subsequently corrected and verified	Total Findings Corrected	% Findings Corrected as of 2/1/10
FFY 04-05	7	6	1	7	100%
FFY 05-06	6	3	3	6	100%
FFY 06-07	4	4	0	4	100%
FFY 07-08	6	5	0	5	83.33%
FFY 08-09	3	N/A*	N/A	0	0

* Findings from FFY 08-09 were made 1-6-10 and the one-year correction requirement has not yet passed.

Actions Taken if Noncompliance Not Corrected:

Despite steps taken to correct this issue, one provider has continued non-compliance in this area. The provider reported that the hiring process took longer than expected and significant improvement was not made. A more stringent state review will occur monthly as proven to be effective with other providers. A written notification of the provider's non-correction of non-compliance was sent in January 2010 (one year from the initial finding) requiring the providers to obtain mandated TA for CAP development, including specific progress reporting requirements to state staff and monthly monitoring meetings until correction is verified.

Verification of Correction (either timely or subsequent):

For FFY 07-08, five providers (out of six) demonstrated correction of non-compliance. All providers with findings are required to submit corrective action plans on a State mandated reporting template that includes: analysis of the root cause(s) of the non-compliance, steps to be taken to reach compliance, persons responsible, and timelines. These corrective action plans must be approved by the State. Technical assistance was available for the development of effective plans. Providers were required to submit evidence of correction within one year that includes evidence of completion of the steps identified and the successful impact of those steps via a data report from RIEICCS or a self-assessment.

All findings for FFY-04-05, 05-06, and 06-07 have all been corrected and closed.

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In summary, the state has verified that each EIS program with noncompliance reported under this indicator in the FFY 2007 APR are correctly implementing the specific regulatory requirements; and has conducted an evaluation/assessment and initial IFSP meeting for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, was completed; consistent with the OSEP Memorandum 09-02 dated October 17, 2008.

Correction of Non-Compliance	Description
1. Describe the analysis that the state did to determine <i>where</i> the noncompliance occurred (in which EI programs);	<ul style="list-style-type: none"> desk audit of all providers utilizing state-wide EI data system program self-assessment of all IDEA requirements with state-defined set of children/records site-based focused monitoring of all programs with data verification (record review) formalization of Data Review Committee monthly meetings for review/analysis/technical assistance planning
2. Describe the state's process for determining <i>why</i> that noncompliance occurred, both at state level and local level;	<ul style="list-style-type: none"> program self-assessment, including an explanation program-identified cause of non-compliance site-based discussion of root causes with management staff comparison of data across programs/over time periods disaggregation of data by service/time period/provider program surveys re: staff recruitment/retention
3. Describe <i>what the state did</i> to require EI programs to revise policies, procedures or practices (if needed);	<ul style="list-style-type: none"> provided state-wide, site-based training/technical assistance to accompany new EI paperwork completion/dissemination of new IFSP Guidance Document data requests to all programs re: missing data
4. Explain how the state <i>collected data to verify</i> that the noncompliance was corrected	<ul style="list-style-type: none"> corrective action plans required of all programs with a finding of non-compliance in this area . corrective action plans included: steps to be taken to correct the issue of non-compliance, by whom, and by when- State followed up by requiring evidence that the steps were taken and that the issue that caused the non-compliance was corrected. Progress data is submitted monthly or bi-monthly by providers with findings and is verified by the state
5. Describe any <i>enforcement actions</i> that the state took for any EI programs that did not correct noncompliance in a timely manner (within one year).	<ul style="list-style-type: none"> 1 Program has not corrected non-compliance within one year and is required to obtain mandated TA for new CAP development, including specific progress reporting requirements to state staff and monthly monitoring meetings until correction is verified
Program-specific follow-up activities related to uncorrected non-compliance	1 program (Trudeau) had uncorrected non-compliance in this area from FFY 06-07. This program was required to:

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Correction of Non-Compliance	Description
	<ul style="list-style-type: none"> clarify/change program policies/practices; provide monthly timeline data reports to the state meet with the state monthly to explain improvement activities and impact create an evening evaluation slot reassign staff to increase evaluation slots <p>Provider was also required to submit evidence of correction within one year that included evidence that the steps identified were taken and the result of those steps via a data report. The uncorrected noncompliance was verified as corrected and the finding was closed on 5/4/09.</p>

Improvement Activities	Timelines	Resources	Status
Technical assistance to all providers regarding data entry of reason if timeline not met.	4/06	Sherlock Center on Disabilities, Lead agency staff	Completed
Technical assistance and training on purpose of initial 45 days for eligibility determination and to get the plan started.	Ongoing	Sherlock Center on Disabilities, Lead agency staff	Ongoing
Certification of providers	Jan 06 for all previous providers and for Easter Seals. June 06 for Homestead March 07 for Looking Upwards	Certification Review Team (includes lead agency staff, Sherlock Center on Disabilities, ICC representative)	Completed
Routine data analysis- (programs were provided with data reports and are now able to run their own reports for quality monitoring purposes)	Ongoing	Data Manger, Welligent, Lead agency staff, Sherlock Center on Disabilities, providers	Ongoing

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**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines /
Resources for *FFY 08-09***

N/A

Part C State Annual Performance Report (APR) for FFY 2008-2009

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator #8: Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services
- B. Notification to LEA, if child potentially eligible for Part B: and
- C. Transition conference, if child potentially eligible for Part B.

(20 USC 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition conferences, including reasons for delays.

Data Source: Focused Monitoring Data

FFY	Measurable and Rigorous Target
08-09	100%

Actual Data for FFY 08-09:

- A. **88.24%** of children exiting Part C had an IFSP with transition steps and services.
- B. **96.65%** of children exiting Part C and potentially eligible for Part B had a notification to the LEA.
- C. **90.64%** of children exiting Part C and potentially eligible for Part B had a transition conference.

Category	# Records Compliant	# Records Reviewed	% of Compliance
A-Transition Steps	150	170	88.24%
B-LEA Notification	202	209	96.65%
C-Transition Conference	155	171	90.64%

RI does not have a Part B notification opt-out policy.

Part C State Annual Performance Report (APR) for FFY 2008-2009**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 08-09**

Slippage occurred in the areas of transition steps (8A), Notification (8B) and Conferences (8C).

Data for these indicators was collected through a self-assessment completed in October 2009 by each provider. The State gave each provider a list of specific records to review that made up 10% of the enrollment for that provider (or 20 records, whichever number was greater). The records selected were for children who were referred and enrolled between July 1, 2008 and June 30, 2009 and who were discharged during this time at 34 months or older. The records chosen were the same for all indicators, which essentially limited the records reviewed for transition to children who were referred, enrolled, and discharged all during this period of time.

Providers who are not compliant are required to review all discharges and report results to DHS on a quarterly basis. Reviewing only current records has allowed us to monitor the new paperwork process. Required information on all children potentially eligible for Part B is sent to Part B to help verify that all children are transitioned. This year state staff found that even though a child had a transition conference and transition activities took place, sometimes steps for transition were not documented or not documented well (not specific or individualized) on the transition form. The State requires that providers use this form for all children who will be discharged and that the form be fully completed. The lack of specific documentation and staffing changes also caused slippage in notification and conference.

The State compared the self-assessment data with the data from RIEICCS, the State's data collection system for Early Intervention and made findings for any program that did not demonstrate compliance as noted below. In addition to issuing findings of noncompliance to each provider that was below 100%, the State conducted site visits for all providers whose data from the self-assessment was below 95%. The State then selected 5% of those records and conducted data verification at each program as well. In addition to requiring corrective action plans for programs that were identified as having noncompliance and requiring submission of updated data to demonstrate correction, programs were also required to correct individual instances of noncompliance when possible.

A new transition plan was put into place as part of the Paperwork Project in 2/08 (See Attachment C). Not all service coordinators were utilizing the form correctly. For example, we require that T-1 of the state Transition Plan be used as the consistent way to send notification to Local Educational Agencies.

Data analysis and program discussion indicated staff misunderstanding of the requirement for transition steps for all children exiting from Part C (not just those potentially eligible for Part B). Late referrals (34.5 months old) to Part C also impacted program non-compliance in this area. A new collaboration between RI Part C and Part B staff has resulted in a streamlined direct referral process to a Local Educational Agency when the child is referred to Part C after 34 months.

Technical assistance to providers will continue. Transition Mentors from each program (including a staff person and the program parent consultant) meet bi-monthly to discuss timelines, requirements and best practices in the transition process. Their responsibility is to disseminate this information to all program staff. This information includes examples of the documentation of transition activities (i.e., notification, steps, and conference).

RI Part B regulations now mandate that the LEA respond within 10 days to the Part C notification of a child who might be eligible for services in their jurisdiction.

A new state-level Part C/Part B Transition Taskforce will convene in March 2010 for 2-4 sessions to analyze strengths and barriers in current Transition practice. This group will also initiate an electronic Transition newsletter for all Transition partners in order to clarify questions, disseminate recommended practice, and highlight creative solutions.

Part C State Annual Performance Report (APR) for FFY 2008-2009

A Part C and Part B Transition workgroup finalized a new “Transition Summary” format and technical assistance document. This format is based on RI’s Early Learning Standards and includes 8 areas of early childhood experience and skills. We have disseminated this widely and encourage EI staff to utilize it as a way to organize child-specific assessment information for use during the Transition process. We are collecting evaluation information on this format and will review and revise, as needed, in the summer of 2010.

The state took actions to make sure all children are connected to a local educational agency (LEA). Twice a year LEA and providers are given a list of all children turning three within the current year. LEA’s used this information to planning purposes. The state also compares children transition from Part C to Part B with the Department of Education to make sure all children are connected. For the children who Part C identifies as leaving Part C as Part B eligibility not determined, the names and DOB of these children are sent to Part B for follow-up.

Rhode Island is in compliance with the IFSP transition content requirements in 34 CFR 303.148(b)(4), 303.344(h), and 303.148(b)(2)(i)(as modified by IDEA section 637 *(a)(9)(A)(ii)(II)), including correction of noncompliance the state reported under this indicator in FFY 2007. The States assures that all children have transition steps, LEA notification and IEP conference (when parents consents) even when providers did not meet the documentation requirements or third birthday requirements.

Correction of FFY 2007 Findings of Noncompliance (if State reported less than 100% compliance) and Correction of FFY 2007 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

Year Non-compliance Identified	Total Findings for (8A) Transition Steps	# of Findings Corrected and Verified within 1 year	# of Findings for which Correction was subsequently corrected and verified	Total Findings Corrected	%Findings Corrected as of 2/1/10
FFY 06-07	1	1	0	1	100%
FFY 07-08	5	4	0	4	80%
FFY 08-09	4	N/A*	N/A	0	0

Year Non-compliance Identified	Total Findings for (8B) LEA Notification	# of Findings Corrected and Verified within 1 year	# of Findings for which Correction was subsequently corrected and verified	Total Findings Corrected	%Findings Corrected as of 2/1/10
FFY 06-07	0	0	0	0	100%
FFY 07-08	0	0	0	0	100%
FFY 08-09	5	N/A*	N/A	0	0

Year Non-compliance Identified	Total Findings for (8C) Transition Conference	# of Findings Corrected and Verified within 1 year	# of Findings for which Correction was subsequently corrected and verified	Total Findings Corrected	%Findings Corrected as of 2/1/10
FFY 06-07	1	1	0	1	100%
FFY 07-08	4	3	0	3	75%
FFY 08-09	5	N/A*	N/A	0	0

* Findings from FFY 08-09 were made 1-6-10 and the one-year correction requirement has not yet passed.

Part C State Annual Performance Report (APR) for FFY 2008-2009**Actions Taken if Noncompliance Not Corrected:**

One provider did not correct the two findings (out of nine total for the State) issued related to transition steps and transition conference. A letter of non-correction of non-compliance was sent in January 2010 (one year from date of initial findings) requiring the provider to obtain mandated TA for CAP development including specific progress reporting requirements to state staff and monthly monitoring meetings until correction is verified.

Verification of Correction (either timely or subsequent):

Seven findings within seven programs (out of nine total findings related to transition for the State) were corrected within one year. All providers with findings were required to submit corrective action plans on a State mandated reporting template that includes: analysis of the root cause(s) of the non-compliance, steps to be taken to reach compliance, persons responsible, and timelines. These corrective action plans must be approved by the State. Technical assistance was available for the development of effective plans. Providers were required to submit evidence of correction within one year that includes evidence of completion of the steps identified and the successful impact of those steps via a data report from RIEICCS or a self-assessment.

All findings for FFY-04-05, 05-06, and 06-07 have all been corrected and closed.

In summary, the state has verified that each EIS program with noncompliance reported under this indicator in the FFY 2007 APR is correctly implementing the specific regulatory requirements; and transition occurs for each child, although late, unless the child is no longer within the jurisdiction of the EIS program, consistent with the OSEP Memorandum 09-02 dated October 17, 2008.

Correction of Non-Compliance	Description
1. Describe the analysis that the state did to determine where the noncompliance occurred (in which EI programs);	<ul style="list-style-type: none"> • desk audit • program self-assessment • site-based focused monitoring including data verification (from program self-assessment) • Data Monitoring monthly meetings
2. Describe the state's process for determining why that noncompliance occurred, both at state level and local level;	<ul style="list-style-type: none"> • program self-assessment included program's explanation of reason/cause for non-compliance • site-based discussion with program management staff • comparison of data across programs/time periods
3. Describe <i>what the state did</i> to require EI programs to revise policies, procedures or practices (if needed);	<ul style="list-style-type: none"> • state-wide, site-based training/technical assistance accompanied the new paperwork, including the new Transition Plan • completion/dissemination of new IFSP Guidance Document • new data entry guidelines for 'transition steps' • data requests to all programs re: missing data

Part C State Annual Performance Report (APR) for FFY 2008-2009

Correction of Non-Compliance	Description
4. Explain how the state <i>collected data to verify</i> that the noncompliance was corrected	<ul style="list-style-type: none"> • corrective action plans required of all programs with a finding of non-compliance in this area . • corrective action plans included: steps to be taken to correct the issue of non-compliance, by whom, and by when- State followed up by requiring evidence that the steps were taken and that the issue that caused the non-compliance was corrected. • Progress data is submitted monthly or bi-monthly by providers with findings and is verified by the state
5. Describe any <i>enforcement actions</i> that the state took for any EI programs that did not correct noncompliance in a timely manner (within one year).	<ul style="list-style-type: none"> • 1 Program has not corrected non-compliance within one year and are required to obtain mandated TA for new CAP development, including specific progress reporting requirements to state staff and monthly monitoring meetings until correction is verified

Part C State Annual Performance Report (APR) for FFY 2008-2009

Improvement Activities	Timelines	Resources	Status
Training and technical assistance	Ongoing	Sherlock Center on Disabilities, Transition mentors, RIPIN	Ongoing
Revision of transition forms	August 2007	Sherlock Center on Disabilities, Transition mentors, RIPIN, Lead agency staff, Part B	Completed 2/08

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 08-09

Due to slippage in this indicator, the following activity was added to help identify individual provider needs and correct the issue.

Improvement Activities	Timelines	Resources	Status
Convene Part C/Part B Transition Taskforce	February 2010	Sherlock Center on Disabilities RI Department of Education Selected Part C and Part B staff RIPIN Parent Consultant Program	Ongoing (2-4 sessions followed by regular dissemination of Transition Newsletter)

Part C State Annual Performance Report (APR) for FFY 2008-2009

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator #9: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

States are required to use the "Indicator 9 Worksheet" to report data for this indicator (see Attachment A)

Data Source: Data to be taken from State monitoring, complaints, hearings and other general supervision system components. Indicate the number of EIS programs monitored related to the monitoring priority areas and indicators and the number of EIS programs monitored related to areas not included in the monitoring priority areas and indicators.

FFY	Measurable and Rigorous Target
08-09	100%

Actual Data for 08-09:

A: 24

B: Percent of noncompliance related to monitoring priority areas and indicators corrected within one year of identification: $19/24 * 100 = 79\%$

Percent of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification: $0/0 * 100 = 0$

Percent of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification: $0/0 * 100 = 0$

Part C State Annual Performance Report (APR) for FFY 2008-2009**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 08-09:**

RI had some slippage in this area. During the review period of 7/1/07-6/30/08, 24 findings of non-compliance were issued and 19 were corrected within one year. Similar findings were grouped into one finding of systematic non-compliance for the same regulatory requirement within a single program. Four of the five findings that were not corrected were all from one provider. This program did submit a corrective action plan to come in to compliance, but it did not lead to improvement. Most of their non-compliance was relative to hiring issues and the confusion of staff not knowing/executing recommended procedures. This program has recently revised their corrective action plans, subsequent to technical assistance, and has restructured the organization of their EI program to allow a greater capacity for closer internal monitoring and development of systems and supports to make substantial improvement. Most staffing positions are now filled and this will help improve timely services, 45-day timeline, and transition. The State has required TA for CAP development as well as for program improvement and monthly monitoring meetings with State staff during 2010. They are also required to submit monthly data reports on their progress for all indicators.

A second provider showed some improvement in their timely services data but did not effectively demonstrate correction of the issue to their non-compliance. For this indicator they are mandated for TA for CAP development as well as program improvement.

The State ensures correction of noncompliance, notwithstanding the extent of the noncompliance or the amount of improvement. Corrective action plans were required of all programs for each finding of non-compliance identified. Corrective action plan templates were provided and required by the State. Technical assistance was either offered or mandated to providers in developing effective corrective action plans. The plans include: an explanation of the factors that contributed to the noncompliance, steps to be taken to correct the issue of non-compliance, by whom, and by when. The State followed up by requiring evidence to verify that the corrective actions were implemented and that the issue that caused the non-compliance was corrected. The State verified correction either by on-site record reviews or by the program submitting data for verification of correction. In addition, the State required correction of all individual instances of noncompliance. For timeline-sensitive requirements, the State requires that the program ensure that all evaluations, services, IFSP meetings, etc. for each child were subsequently provided, even if not within timelines.

Part C State Annual Performance Report (APR) for FFY 2008-2009

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	6	6	4
	Dispute Resolution: Complaints, Hearings	0		0
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	3	3	3
	Dispute Resolution: Complaints, Hearings	0		0
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0
	Dispute Resolution: Complaints, Hearings	0		0
4. Percent of families participating in Part C who report that early intervention services have helped the family	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0
	Dispute Resolution: Complaints, Hearings	0		0

Part C State Annual Performance Report (APR) for FFY 2008-2009

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
5. Percent of infants and toddlers birth to 1 with IFSPs	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0
6. Percent of infants and toddlers birth to 3 with IFSPs	Dispute Resolution: Complaints, Hearings	0		0
7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	6	6	5
	Dispute Resolution: Complaints, Hearings	0		0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: A. IFSPs with transition steps and services;	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	5	5	4
	Dispute Resolution: Complaints, Hearings	0		0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0

Part C State Annual Performance Report (APR) for FFY 2008-2009

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
preschool and other appropriate community services by their third birthday including: B. Notification to LEA, if child potentially eligible for Part B	Dispute Resolution: Complaints, Hearings	0		0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: C. Transition conference, if child potentially eligible for Part B.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	4	4	3
	Dispute Resolution: Complaints, Hearings	0		0
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0
	Dispute Resolution: Complaints, Hearings	0		0
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0

Part C State Annual Performance Report (APR) for FFY 2008-2009

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
	Dispute Resolution: Complaints, Hearings	0		0
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0		0
	Dispute Resolution: Complaints, Hearings	0		0
Sum the numbers down Column a and Column b			24	19

Percentage of non-compliance corrected within one year of identification: $19/24 * 100 = 79\%$

Correction of Non-Compliance	Description
1. Describe the analysis that the state did to determine <i>where</i> the noncompliance occurred (in which EI programs);	<ul style="list-style-type: none"> • desk audit of all programs (state-wide EI data system) • program self-assessment of IDEA requirements with state-defined set of children/records • site-based focused monitoring for data verification (record reviews) • formalization of Data Review Committee and monthly meetings for review/analysis/technical assistance planning.
2. Describe the state's process for determining <i>why</i> that noncompliance occurred, both at state level and local level;	<ul style="list-style-type: none"> • program self-assessment, including explanation of factors that contributed to non-compliance • site-based discussion of root cause(s) with program management staff • comparison of data across programs/over time periods • disaggregation of data by service/time periods/provider • program surveys re: staff recruitment/retention issues

Part C State Annual Performance Report (APR) for FFY 2008-2009

Correction of Non-Compliance	Description
3. Describe <i>what the state did</i> to require EI programs to revise policies, procedures or practices (if needed);	<ul style="list-style-type: none"> corrective action plans on state required template state-wide, site-based training/ technical assistance accompanied new EI paperwork completion/dissemination of new IFSP Guidance Document data requests to all programs re: missing data
4. Explain how the state <i>collected data to verify</i> that the noncompliance was corrected	<ul style="list-style-type: none"> corrective action plans required of all programs with a finding of non-compliance in this area . corrective action plans included: steps to be taken to correct the issue of non-compliance, by whom, and by when- State followed up by requiring evidence that the steps were taken and that the issue that caused the non-compliance was corrected. Progress data is submitted monthly or bi-monthly by providers with findings and is verified by the state
5. Describe any <i>enforcement actions</i> that the state took for any EI programs that did not correct noncompliance in a timely manner (within one year).	<ul style="list-style-type: none"> Programs that have not corrected non-compliance within one year are required to obtain mandated TA for new CAP development, including specific progress reporting requirements to state staff and monthly monitoring meetings until correction is verified
Program-specific follow-up activities related to uncorrected non-compliance	<ul style="list-style-type: none"> see specific indicators for details on program specific activities.

Improvement Activities	Timelines	Resources	Status
Implementation of Certification Standards	1/06	Lead agency staff, Sherlock Center on Disabilities	Completed
Monthly data review and analysis for state and individual programs	Ongoing	Sherlock Center on Disabilities, providers, lead agency staff	Ongoing
Notification of findings and requirement for corrective action plans	Annually in December	Lead agency staff	Ongoing
Training and technical assistance	Ongoing	Sherlock Center on Disabilities, Lead agency staff, providers	Ongoing

Part C State Annual Performance Report (APR) for FFY 2008-2009

Additional Information Required by the OSEP APR Response Table (if applicable)

Statement from the Response Table	State's Response
Demonstrate compliance of Timely Services	The State has required that programs with findings of non-compliance, must submit corrective action plans and submit monthly/bimonthly quantitative progress reports for review by data review team in order to more proactively address timely correction on non-compliance.
Demonstrate compliance of initial 45-day timeline	The State has required that programs with findings of non-compliance, must submit corrective action plans and submit monthly/bimonthly quantitative progress reports for review by data review team in order to more proactively address timely correction on non-compliance.
Demonstrate compliance for Transition	The State has required that programs with findings of non-compliance, must submit corrective action plans and submit monthly/bimonthly quantitative progress reports for review by data review team in order to more proactively address timely correction on non-compliance. All children who were found non-compliance due to provider issues did transition to Part B when found eligible. Yearly the state also Partners with Part B to verify all children in EI have reach the Part B. All providers who had non-compliance in this indicator have been proactive with identifying the root cause of non-compliance and submitted step taken for correction. Note that even when the child had a Conference, if steps were not clearly documented, the state indicated a finding in hopes to improve documentation across the EI system. See above for details.
Demonstrate of correction of non-compliance using indicator 9 worksheet	See worksheet

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 08-09: N/A

Part C State Annual Performance Report (APR) for FFY 2008-2009

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator #10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100.

Data Source: Data collected on Part C - See Attachment B.

FFY	Measurable and Rigorous Target
08-09	100%

Actual Data for 08-09:

No signed written formal complaints were filed. See Attachment B for Table 4.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 08-09:

Not Applicable

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 08-09:

Not Applicable

Part C State Annual Performance Report (APR) for FFY 2008-2009

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator #11: Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(3.2(a) + 3.2(b)) divided by 3.2] times 100.

Data Source: Data collected on Part C - See Attachment B.

FFY	Measurable and Rigorous Target
08-09	100%

Actual Target Data for 08-09:

No signed written formal complaints were filed. See Attachment B for Table 4.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 08-09:

Not Applicable

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 08-09:

Not Applicable

Part C State Annual Performance Report (APR) for FFY 2008-2009

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator #12: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = (3.1(a) divided by 3.1) times 100.

Data Source: Data collected on Part C – See Attachment B.

FFY	Measurable and Rigorous Target
08-09	100%

Actual Target Data for 08-09:

Part B due process procedures are not utilized by Rhode Island DHS.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 08-09:

Not Applicable

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 08-09:

Not Applicable

Part C State Annual Performance Report (APR) for FFY 2008-2009

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator #13: Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.

Data Source: Data collected on Part C - See Attachment B

FFY	Measurable and Rigorous Target
08-09	100%

Actual Target Data for 08-09:

No request for mediations were filed. See Attachment B for Table 4.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 08-09:

Not Applicable

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 08-09:

Not Applicable

Part C State Annual Performance Report (APR) for FFY 2008-2009

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator #14: State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: State reported data, including 618 data, State performance plan, and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count and settings and November 1 for exiting and dispute resolution); and
- b. Accurate, including covering the correct year and following the correct measurement.

States are required to use the "Indicator 14 Data Rubric" for reporting data for this indicator

Data Source: State selected data sources, including data from the State data system, as well as technical assistance and monitoring systems.

FFY	Measurable and Rigorous Target
08-09	100%

Actual Data for 08-09: 100%

A. Data has been submitted on or before February 1st for child count, including race and ethnicity, settings and November 1st for exiting, personnel and dispute resolution.

B. DHS assures that data submitted is accurate and complete. The suggested spreadsheet was used to calculate this data and is on the next page. Focused monitoring was completed in order to ensure accuracy of data for Indicator #1 and Indicator #8.

APR Data			
APR Indicator	Valid and Reliable	Correct Calculation	Total
1	1	1	2
2	1	1	2
3	1	1	2
4	1	1	2
5	1	1	2

Part C State Annual Performance Report (APR) for FFY 2008-2009

APR Data			
APR Indicator	Valid and Reliable	Correct Calculation	Total
6	1	1	2
7	1	1	2
8a	1	1	2
8b	1	1	2
8c	1	1	2
9	1	1	2
10	NA	NA	0
11	NA	NA	0
12	NA	NA	0
13	NA	NA	0
	Subtotal		22
APR Score Calculation	Timely Submission Points - If the FFY2006 APR was submitted on-time, place the number 5 in the cell on the right.		5
	Grand Total - (Sum of subtotal and Timely Submission Points) =		27

618 State-Reported Data					
Table	Timely	Compete Data	Passed Edit Check	Response to Data Note Requests	Total
Table 1 - Child Count Due Date: 2/1/09	1	1	1	1	4
Table 2 - Program Settings Due Date: 2/1/09	1	1	1	1	4

Part C State Annual Performance Report (APR) for FFY 2008-2009

618 State-Reported Data					
Table	Timely	Compete Data	Passed Edit Check	Response to Data Note Requests	Total
Table 3 - Exiting Due Date: 11/1/09	1	1	1	N/A	3
Table 4 - Dispute Resolution Due Date: 11/1/09	1	1	1	N/A	3
				Subtotal	14
618 Score Calculation			Grand Total (Subtotal X 2.5) =		35

Indicator #14 Calculation	
A. APR Grand Total	27
B. 618 Grand Total	35
C. APR Grand Total (A) + 618 Grand Total (B) =	62
Total N/A in APR	8
Total N/A in 618	0
Base	62
D. Subtotal (C divided by Base) =	1.0
E. Indicator Score (Subtotal D x 100) =	100

*Note any cell marked as NA will decrease the denominator by 1 for APR and 2.5 for 618

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 08-09:

This indicator was calculated based on the recommended federal guidelines. Improvement plans for each indicator can be found under the indicator. DHS staff includes a data manager. She provides individualized technical assistance related to the DHS web-based data system and collection methods. She also facilitates meetings as needed to address system issues with all programs.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for 08-09

N/A

Part C State Annual Performance Report (APR) for FFY 2008-2009

ATTACHMENT A: Family Survey

*Below are the questions found on our family survey. The format received by families (in PDF format) is different than what is seen here.

Understanding your child's strengths, abilities, and special needs

☐ *Your child is growing and learning. How well do you understand your child's development?*

We are just beginning to understand our child's development		We have a basic understanding of our child's development, but still have a lot to learn		We have a pretty good understanding of our child's development		We understand our child's development very well
1	2	3	4	5	6	7

☐ *Some children have special health needs, a disability, or are delayed in their development. How much do you know about your child's special needs?*

☐ CHECK HERE IF YOUR CHILD DOES NOT HAVE SPECIAL NEEDS AND GO TO QUESTION 3

Right now we do not know very much		We have learned some things, but still have a lot of unanswered questions		We know a lot, but still need or want to know more		We are confident that we know most of what we need to know right now
1	2	3	4	5	6	7

☐ *Professionals who work with you and your child want to know if the things they do are working. Are you able to tell if your child is making progress?*

Right now we can't tell if our child is making progress		We sometimes can tell if our child is making progress, but still have a lot to learn		We usually can tell if our child is making progress		We almost always can tell if our child is making progress
1	2	3	4	5	6	7

Part C State Annual Performance Report (APR) for FFY 2008-2009

Knowing your rights and advocating for your child

☐ A variety of programs and services may be available for your child and family. Do you know what is available for your child and family?

We are just beginning to learn about the programs and services that are available		We know about some programs and services, but still have a lot to learn		We think we are aware of most available programs and services		We are very aware of the programs and services that are available
1	2	3	4	5	6	7

☐ Parents often meet with professionals to plan services or activities.

How comfortable are you participating in these meetings?

Right now we are very uncomfortable participating in meeting		We are not very comfortable participating in meetings, but we do it anyway		We are pretty comfortable participating in meetings		We are very aware of our rights and know exactly what to do if we are not satisfied
1	2	3	4	5	6	7

☐ Families of children with special needs have rights, and there are things you can do if you are not satisfied. How well do you know your rights and what to do if you are not satisfied?

☐ CHECK HERE IF YOUR CHILD DOES NOT HAVE SPECIAL NEEDS AND GO TO QUESTION 7

We are not sure about our rights or what to do if we are not satisfied		We understand our basic rights but are not sure about all of our options if we are not satisfied		We think we know most of our rights and what to do if we are not satisfied		We are very aware of our rights and know exactly what to do if we are not satisfied
1	2	3	4	5	6	7

Part C State Annual Performance Report (APR) for FFY 2008-2009

Helping your child develop and learn

☐ All parents help their children develop and learn, but sometimes it is hard to know what to do.

How would you describe your ability to help your child develop and learn?

We need to know a lot more about how to help our child develop and learn		We know the basics of helping our child develop and learn, but still have many questions		We feel pretty sure that we know how to help our child develop and learn		We are very sure that we know how to help our child develop and learn
1	2	3	4	5	6	7

☐ All parents try to help their children learn to behave the way they would like, but sometimes it is hard to know what to do. How would you describe your ability to help your child learn to behave the way you would like?

We need to know a lot more about how to help our child behave like we want		We know the basics of helping our child behave, but still have many questions		We feel pretty sure that we know how to help our child behave		We are very sure that we know how to help our child behave
1	2	3	4	5	6	7

☐ Your family has worked with professionals to develop a plan to help your child learn new skills and behaviors. How much are you able to help your child learn or practice these new skills at home or in your community?

We have not yet started to help our child learn or practice these skills and behaviors		We have started to help our child learn and practice these skills and behaviors, but it is not a regular thing yet		We often help our child learn and practice these skills and behaviors, but it is not as regular as we would like		We regularly help our child learn and practice these skills and behaviors throughout the day
1	2	3	4	5	6	7

Part C State Annual Performance Report (APR) for FFY 2008-2009

Having support systems

☐ *Many people feel that talking with another person helps them deal with problems or celebrate when good things happen. Does your family have someone you trust to listen and talk with you?*

Right now, we really don't have anyone we can talk with about the things that are happening in our lives		We can probably find at least one person we could talk with, but are not very satisfied with the situation		We usually have other people that we can talk with about things		There are definitely people in our lives we can talk with whenever we need to
1	2	3	4	5	6	7

☐ *Families sometimes must rely on other people for help when they need it, for example to provide a ride, run an errand, or watch their child for a short period of time. Do you have someone you can call on when you need help with things?*

Right now our family really doesn't have anyone we can call on when we need help with things		In an emergency we have people we can call on for help, but not for the everyday things		Usually there is someone that we can call on for help when we need it		We almost always have other people we can call on for help when we need it
1	2	3	4	5	6	7

☐ *Most families have things they enjoy doing. How much is your family able to do the things you enjoy?*

Right now it is really difficult to do any of the things we enjoy		We are able to participate in some of the things we enjoy, but not nearly as much as we would like		We are able to participate in many of the activities we enjoy		We are able to participate in almost all of the activities we enjoy
1	2	3	4	5	6	7

Part C State Annual Performance Report (APR) for FFY 2008-2009

Assessing your community

☐ *All children need medical care. How would you describe the medical care you have for your child right now?*

We do not have the medical care we want for our child		We have some medical care, but still have a long way to go before it is what we want		We have good medical care for our child		We have excellent medical care for our child
1	2	3	4	5	6	7

☐ *Many families have a need for quality childcare. By this, we do not mean occasional babysitting, but regular childcare, either part-day or full-day. How would you describe the childcare you have for your child right now?*

We do not have the childcare we want OR because of our child's special needs we have decided not to look for it		We have some childcare, but still have a long way to go before it is what we want		We have good childcare for our child		We have excellent childcare for our child
1	2	3	4	5	6	7

☐ *Many families want their child to play with other children or participate in religious, community, or social activities.*

How would you describe your child's participation in these activities right now?

Right now our child does not participate in activities we want OR because of our child's special needs we have decided not to look for it		Our child participates in some social or community activities, but we have a long way to go before it is what we want		Our child has good participation in social or community activities		Our child has excellent participation in social or community activities
1	2	3	4	5	6	7

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Your feelings about early intervention

☐ To what extent has early intervention helped your family know and understand your rights?

Early intervention has not helped us know about our family's rights		Early intervention has done a good job of helping us know our family's rights		Early intervention has done a good job of helping us know our family's rights		Early intervention has done an excellent job of helping us know about our family's rights
1	2	3	4	5	6	7

☐ To what extent has early intervention helped your family effectively communicate your child's needs?

Early intervention has not helped us effectively communicate our child's needs		Early intervention has done a few things to help us effectively communicate our child's needs		Early intervention has done a good job of helping us effectively communicate our child's needs		Early intervention has done an excellent job of helping us effectively communicate our child's needs
1	2	3	4	5	6	7

☐ To what extent has early intervention helped your family be able to help your child develop and learn?

Early intervention has not helped us help our child develop and learn		Early intervention has done a few things so that we can help our child develop and learn		Early intervention has done a good job of helping us help our child develop and learn		Early intervention has done an excellent job of helping us help our child develop and learn
1	2	3	4	5	6	7

THANK YOU FOR COMPLETING THIS SURVEY!

Part C State Annual Performance Report (APR) for FFY 2008-2009

ATTACHMENT B: Table 4 Report of Dispute Resolution

U.S. DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION
AND REHABILITATIVE SERVICES
OFFICE OF SPECIAL EDUCATION
PROGRAMS

TABLE 4

REPORT OF DISPUTE RESOLUTION UNDER PART C, OF THE
INDIVIDUALS WITH DISABILITIES EDUCATION ACT
2008-09

PAGE 1 OF 1

OMB NO.: 1820-0678

FORM EXPIRES: 11/30/2009

STATE: __Rhode Island__

SECTION A: WRITTEN, SIGNED COMPLAINTS	
(1) Total number of written, signed complaints filed	0
(1.1) Complaints with reports issued	0
(a) Reports with findings of noncompliance	0
(b) Reports within timeline	0
(c) Reports within extended timelines	0
(1.2) Complaints pending	0
(a) Complaints pending a due process hearing	0
(1.3) Complaints withdrawn or dismissed	0

SECTION B: MEDIATION REQUESTS	
(2) Total number of mediation requests received	0
(2.1) Mediations held	0
(a) Mediations related to hearing requests	0
(i) Mediation agreements related to hearing requests	0
(b) Mediations not related to hearing requests	0
(i) Mediation agreements not related to hearing requests	0
(2.2) Mediations not held (including pending)	0

SECTION C: HEARING REQUESTS	
(3) Total number of hearing requests filed (for all States)	0
3.1) Resolution meetings (applicable ONLY for states using Part B due process hearing procedures)	-9
(a) Written settlement agreements reached through resolution meetings	-9
(3.2) Hearings (fully adjudicated) (for all states)	0
(a) Complete EITHER item (1) OR item(2), below as applicable.	-9
(1) Decisions within timeline - Part C procedures	0
(2) Decisions within timeline - Part B procedures	-9
(b) Decisions within extended timeline (applicable ONLY if using Part B Due process hearing procedures)	-9
(3.3) Resolved without a hearing (for all States)	0

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ATTACHMENT C: Transition Form

Early Intervention Individualized Transition Plan

Child's Name: _____ DOB: ____/____/____ Date: ____/____/____

Current Status (e.g. developmental progress/continuing areas of need, services, outside providers, educational surrogate parent):**Family's Priorities and Questions about Transition:****Is a referral to the child's local school system appropriate?** ☐ YES ☐ NO

- ☐ I give consent to refer my child to the local school system in which we reside along with the release of information as checked off below. I understand that this consent is valid for one year from the date signed, and because it is voluntary consent it may be revoked at any time with a written revocation.
- ☐ I decline making a referral for my child

Parent/Guardian Signature_____
Date**Reason for not consenting to referral:****Early Intervention Referral for Special Education**

Along with the information provided to you below I have attached the following documents for your review:

- ☐ Release of Information
- ☐ Individualized Family Service Plan (IFSP)
- ☐ Developmental Assessment Report
- ☐ Progress Report(s)
- ☐ Other: _____

Child's Address: _____

Phone: _____ Gender: ☐ M ☐ F

Reason for Referral: _____

Parent/Guardian: _____

Address: _____

Parent/Guardian: _____

Address: _____

Family's Primary Language: _____

Interpreter Needed: ☐ YES ☐ NOTransportation Needed ☐ YES ☐ NO

EI Agency: _____

Contact: _____

Phone: _____ Fax: _____

Family was provided information on CEDARR:☐ YES ☐ NO ☐ N/A

School District: _____

Contact: _____

Phone: _____ Fax: _____

Date of Referral to LEA: ____/____/____

Part C State Annual Performance Report (APR) for FFY 2008-2009

Rev. 04/01/08

TI

Early Intervention Transition Steps

Child's Name: _____ DOB: ____/____/____ Date: ____/____/____

EARLY INTERVENTION					
Prepare Child for Transition			Other Transition Steps		
<small>(e.g. consider new outcomes, prepare child for changes and adjustments to a new setting, observation of child)</small>			<small>(e.g. review IFSP, linkage to community resources, Educational Advocate)</small>		
Steps/Action	Person(s) Responsible	Date to be Completed	Steps/Action		Date to be Completed

FAMILY	EARLY CHILDHOOD PROGRAM/LOCAL EDUCATION AGENCY
<small>(e.g. parent-to-parent, workshops, observe various early childhood learning and/or service settings)</small>	<small>(e.g. information on eligibility, evaluations, program options, Early Learning Standards)</small>
Steps/Action	Steps/Action

If Transition Conference with the Local Education Agency did not occur, indicate reason:

Transition Conference Date: ____/____/____

Transition Conference Meeting Attendance:

Information Provided to Family

- ☐ Copy of LEA Procedural Safeguards
- ☐ Special Ed. Parent Advisory Board Contact Information

Parent/Guardian: _____ Service Coordinator: _____

School Representative: _____ Others: _____

Others: _____ Others: _____

Rev. 04/01/08

T2 _____